

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

American College of Cardiology Political Action Committee

ADDRESS (number and street)

9111 Old Georgetown Road

Check if different
than previously
reported. (ACC)

Bethesda

MD

20814

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00375360

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2006

through

07

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Richard Goldberg

Signature of Treasurer

Electronically Filed by Richard Goldberg

Date

08

15

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
American College of Cardiology Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		401220.04
(b) Cash on Hand at Beginning of Reporting Period	406149.42	
(c) Total Receipts (from Line 19)	8247.12	151009.62
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	414396.54	552229.66
7. Total Disbursements (from Line 31)	11431.26	149264.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	402965.28	402965.28
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y Y Y
2 0 0 6

To:

M M
0 7D D
3 1Y Y Y Y
2 0 0 6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5724.33	121724.98
(i) Itemized (use Schedule A)		
(ii) Unitemized	2317.00	20675.32
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	8041.33	142400.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	8041.33	142400.30
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	205.79	6609.32
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	8247.12	151009.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8247.12	151009.62

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	247.39	6330.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	247.39	6330.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11089.66	139589.66
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	3250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	3250.00
29. Other Disbursements.....	94.21	94.21
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11431.26	149264.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	11431.26	149264.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	8041.33	142400.30
34. Total Contribution Refunds (from Line 28(d))	0.00	3250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8041.33	139150.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	247.39	6330.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	205.79	6609.32
38. Net Operating Expenditures (subtract Line 37 from Line 36)	41.60	-278.81

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial) Ghassan Al-Zaghrini Mailing Address 2500 Fondren Road Suite 270 City State Zip Code Houston TX 77063-2321 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>500.00</div>		Date of Receipt <div>07 / 20 / 2006</div> Transaction ID: 45881-78539675474167 Amount of Each Receipt this Period <div>500.00</div>
B. Full Name (Last, First, Middle Initial) Jay Alexander Mailing Address 2151 Waukegan Road #100 City State Zip Code Bannockburn IL 60015-1884 FEC ID number of contributing federal political committee. C Name of Employer North Shore Cardiologists Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>1400.00</div>		Date of Receipt <div>07 / 30 / 2006</div> Transaction ID: 080806-VLEF0ABE2148 Amount of Each Receipt this Period <div>200.00</div>
C. Full Name (Last, First, Middle Initial) Timothy Bateman Mailing Address 4330 Wornall Road Suite 2000 City State Zip Code Kansas City MO 64111-5939 FEC ID number of contributing federal political committee. C Name of Employer Cardiovascular Consultant-s, PC Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>350.00</div>		Date of Receipt <div>07 / 29 / 2006</div> Transaction ID: 080806-VLFF0ABAED22 Amount of Each Receipt this Period <div>50.00</div>

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alan Brown

Mailing Address 4th Floor Edwards Heart Hospital
801 S Washington StreetCity State Zip Code
Naperville IL 60540-7430FEC ID number of contributing
federal political committee.

C

Name of Employer
Midwest Heart SpecialistsOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 6

Transaction ID: 080806-VLFF0ABE1EAB

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Hollace Chastain

Mailing Address 1819 Carew Street

City State Zip Code
Fort Wayne IN 46805-4705FEC ID number of contributing
federal political committee.

C

Name of Employer
Fort Wayne CardiologyOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 6

Transaction ID: 080806-VLEF0ABE1EA1

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. David Clardy

Mailing Address 737 Broadway

City State Zip Code
Fargo ND 58102-4421FEC ID number of contributing
federal political committee.

C

Name of Employer
Meritcare Medical CenterOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 3 / 2 0 0 6

Transaction ID: 13721-45957583189011

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial) Bernard Clark Mailing Address 114 Woodland Street City State Zip Code Hartford CT 06105-1208 FEC ID number of contributing federal political committee. C Name of Employer St. Francis Hospital and Medical Center Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 9 / 2 0 0 6 Transaction ID: 080806-VLFF0ABAED2C Amount of Each Receipt this Period 50.00
B. Full Name (Last, First, Middle Initial) Karen Collishaw Mailing Address 9111 Old Georgetown Road City State Zip Code Bethesda MD 20814-1616 FEC ID number of contributing federal political committee. C Name of Employer American College of Cardiology Occupation ADMINISTRATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 0 / 2 0 0 6 Transaction ID: 080806-VLEF0ABE1EAA Amount of Each Receipt this Period 50.00
C. Full Name (Last, First, Middle Initial) Jose Diez Mailing Address 1410 Annunciation Street # 4411 City State Zip Code New Orleans LA 77030 FEC ID number of contributing federal political committee. C Name of Employer Baylor College of Medicine eThoracic Sur Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Transaction ID: 45881-35264223814010 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial) James Fasules Mailing Address S3120 3rd Floor Sturgis Building 800 Marshall Street City Little Rock State AR Zip Code 72202-3510 FEC ID number of contributing federal political committee. C Name of Employer Arkansas Children's HospitalPediatric Occupation PEDIATRIC CARD. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 294.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 0 / 2 0 0 6 Transaction ID: 080806-VLEF0ABE1EA7 Amount of Each Receipt this Period 42.00
B. Full Name (Last, First, Middle Initial) Blair Foreman Mailing Address 309 Sunset Street City Iowa City State IA Zip Code 52803-2473 FEC ID number of contributing federal political committee. C Name of Employer Cardiovascular Medicine PC Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Transaction ID: 45881-89985293149949 Amount of Each Receipt this Period 100.00
C. Full Name (Last, First, Middle Initial) Alan Forker Mailing Address 2208 W 125th Street City Leawood State KS Zip Code 64111-3220 FEC ID number of contributing federal political committee. C Name of Employer Saint Lukes HospitalMid America Heart Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 1 / 2 0 0 6 Transaction ID: 08899-93584841489792 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

642.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial) Kevin Hart Mailing Address 1819 Carew Street City State Zip Code Fort Wayne IN 46805-4705 FEC ID number of contributing federal political committee. C Name of Employer Fort Wayne Cardiology Corporation Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Transaction ID: 45881-06791323423385 Amount of Each Receipt this Period 42.00
B. Full Name (Last, First, Middle Initial) C. David Joffe Mailing Address 7067 Meeker Commons City State Zip Code Dayton OH 45414-3969 FEC ID number of contributing federal political committee. C Name of Employer Dayton Heart Center, Inc. Occupation INTERVENTIONAL CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Transaction ID: 45881-99396914243699 Amount of Each Receipt this Period 50.00
C. Full Name (Last, First, Middle Initial) Venkataraman Krishnaswami Mailing Address 407 Bryn Court City State Zip Code Pittsburgh PA 15219-5114 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 0 / 2 0 0 6 Transaction ID: 45881-75098818540573 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

342.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Victor Mendez-Beauchamp

Mailing Address Torre De Plaza Las Americas Suite

City State Zip Code
Hato Rey PR 00918

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 11 / 2006

Transaction ID: 08899-59478396177292

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael Mirro

Mailing Address 1819 Carew Street

City State Zip Code
Fort Wayne IN 46805-4705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fort Wayne Cardiology

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2006

Transaction ID: 080806-VLFF0ABE1EA8

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Frank Navetta

Mailing Address 619 S Fleishel Avenue Suite 101

City State Zip Code
Tyler TX 75701-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tyler Inpatient Management
Serv

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2006

Transaction ID: 080806-VLFF0AC221F9

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial)
Daniel Osimani
Mailing Address 1515 Breckenridge Drive

City State Zip Code
Blacksburg VA 24060-7023

FEC ID number of contributing
federal political committee.

C

Name of Employer
HCA

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 6

Transaction ID: 45881-86191958189011

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Jagdish Patel
Mailing Address 1236 Saint Andrews Drive

City State Zip Code
Schererville IN 46375-2932

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 1 / 2 0 0 6

Transaction ID: 08899-43029421567917

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Norman Ratliff
Mailing Address 4721 Karen Circle

City State Zip Code
Hopkins MN 55101-2502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regions Hospital

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 6

Transaction ID: 45881-37459963560104

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial) Gary Renaldo		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 0 / 2 0 0 6
Mailing Address 4304 Allistair Road		Transaction ID: 45881-49082583189011
City Winston-Salem	State NC	Amount of Each Receipt this Period 250.00
Zip Code 27104-1206		
FEC ID number of contributing federal political committee. C		
Name of Employer Cath Lab Medical Director	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
B. Full Name (Last, First, Middle Initial) George Rodgers		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 9 / 2 0 0 6
Mailing Address 3300 Duval Road Suite 150		Transaction ID: 080806-VLEF0ABAED23
City Austin	State TX	Amount of Each Receipt this Period 85.00
Zip Code 78759-3542		
FEC ID number of contributing federal political committee. C		
Name of Employer Biophysical Corporation	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	
C. Full Name (Last, First, Middle Initial) Richard Roth		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 3 / 2 0 0 6
Mailing Address 222 Route 59, Suite 302		Transaction ID: 13721-29052370786667
City Suffern	State NY	Amount of Each Receipt this Period 250.00
Zip Code 10901-5208		
FEC ID number of contributing federal political committee. C		
Name of Employer Hudson Heart Associates	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		585.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial)

Richard Trohman

Mailing Address 1653 West Congress Parkway, Room 9

City State Zip Code
 Chicago IL 60612-3833

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rush Presb.-St. Lukes Med.
Ctr.

Occupation
ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 0 / 2 0 0 6

Transaction ID: 45881-22236269712448

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)

Mary Walsh

Mailing Address 8333 Naab Road, Suite 400

City State Zip Code
 Indianapolis IN 46260-1992

FEC ID number of contributing
federal political committee.

C

Name of Employer
Director, CHF and Nuclear
CardiologyTh

Occupation
HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 9 / 2 0 0 6

Transaction ID: 080806-VLFF0ABAED29

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Steven West

Mailing Address 14171 Metropolis Avenue Suite 101

City State Zip Code
 Fort Myers FL 33912-4335

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Consultants of
Southwest Fl

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 0 6

Transaction ID: 080806-VLEF0ABE1EAC

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial) Thomas White Mailing Address 1819 Carew Street City Fort Wayne State IN Zip Code 46805-4705 FEC ID number of contributing federal political committee. C Name of Employer Fort Wayne Cardiology Corporation Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00		Date of Receipt MM / DD / YYYY 07 / 20 / 2006 Transaction ID: 45881-93320864439011 Amount of Each Receipt this Period 42.00
B. Full Name (Last, First, Middle Initial) John Windsor Mailing Address 310 N 10th Street City Bismarck State ND Zip Code 58501-4516 FEC ID number of contributing federal political committee. C Name of Employer Heart & Lung Clinic Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt MM / DD / YYYY 07 / 30 / 2006 Transaction ID: 080806-VLEF0ABE1EA5 Amount of Each Receipt this Period 100.00
C. Full Name (Last, First, Middle Initial) Michael Wolk Mailing Address 876 Park Avenue City New York State NY Zip Code 10021-8722 FEC ID number of contributing federal political committee. C Name of Employer New York Cardiology Assoc. Occupation ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 583.31		Date of Receipt MM / DD / YYYY 07 / 30 / 2006 Transaction ID: 080806-VLFF0ABE1EA6 Amount of Each Receipt this Period 83.33

SUBTOTAL of Receipts This Page (optional)

225.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial) R. Scott Wright		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6	
Mailing Address Divide of CrdIgy Gonda 5-477 200 First Street Southwest		Transaction ID: 080806-VLEF0AA06C9A	
City Rochester	State MN	Zip Code 55905-0001	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mayo Clinic	Occupation ADULT CARDIOLOGY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

5724.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 23

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City State Zip Code
 Richmond VA 23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6609.32

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 17606-22922915220260

Amount of Each Receipt this Period

12.15

Reimburse for June Amex
Fees

Full Name (Last, First, Middle Initial)

B. American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City State Zip Code
 Richmond VA 23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6609.32

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 17606-71570986509323

Amount of Each Receipt this Period

193.64

Reimburse for July Disc/M-
erchant Fees

SUBTOTAL of Receipts This Page (optional)

205.79

TOTAL This Period (last page this line number only)

205.79

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
July Amex Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: V28029-9745599627494

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

53.75

Full Name (Last, First, Middle Initial)

B. Discover Business Services

Mailing Address P.O. Box 3010

City
New Albany

State
OH

Zip Code
43054

Purpose of Disbursement
July Discover Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: M17077-2835046648979

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

2.09

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address 7300 Chapman Hwy

City
Knoxville

State
TN

Zip Code
37920

Purpose of Disbursement
July Merchant Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: M17077-4420892596244

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

145.44

SUBTOTAL of Disbursements This Page (optional)

201.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wachovia Bank

Mailing Address C/O Nova Information Systems
7300 Chapman Hwy

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
July Merchant Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: M17077-6582452654838

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

46.11

SUBTOTAL of Disbursements This Page (optional) ►

46.11

TOTAL This Period (last page this line number only) ►

247.39

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Beilenson for Congress

Mailing Address 5820 York Rd
Suite 205

City Baltimore State MD Zip Code 21212

Purpose of Disbursement
Contribution

Candidate Name
Peter Beilenson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 03

Transaction ID: 02744-4236261248588

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Camille Bonta

Mailing Address 9111 Old Georgetown Rd

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Reimbursement for fundraiser

Candidate Name
Sherrod Brown

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District:

Transaction ID: V55902-0860406756401

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

94.21

In-Kind

Full Name (Last, First, Middle Initial)

C. Ed Bryant for US Senate Inc

Mailing Address 5214 Maryland Way
Suite 304

City Brentwood State TN Zip Code 37027

Purpose of Disbursement
Contribution

Candidate Name
Ed Bryant

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District:

Transaction ID: 02744-8818933367729

Date of Disbursement

07 / 27 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5094.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of John Boehner

Mailing Address 7908-I Cincinnati Dayton Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement
Contribution

Candidate Name
John Boehner

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 08

Transaction ID: 47072-5428888201713

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Inslee for Congress

Mailing Address PO Box 33027

City Seattle State WA Zip Code 98133

Purpose of Disbursement
Contribution

Candidate Name
Jay Inslee

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 01

Transaction ID: 47072-5633203387260

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Pete Stark Re-Election Committee

Mailing Address PO Box 8331

City Fremont State CA Zip Code 94537

Purpose of Disbursement
Contribution

Candidate Name
Pete Stark

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 13

Transaction ID: 47072-3151361346244

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Price for Congress

Mailing Address PO Box 425

City
Roswell

State
GA

Zip Code
30077

Purpose of Disbursement
Uncashed 6/21/06 Contribution

Candidate Name
Thomas Price

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 06

Transaction ID: 56051-28304690122604

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

-5000.00

Full Name (Last, First, Middle Initial)

B. Storm Chasers

Mailing Address PO Box 237

City
Monticello

State
IN

Zip Code
47960

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 47072-3941308856010

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Stupak for Congress

Mailing Address 817 Ninth Avenue

City
Menominee

State
MI

Zip Code
49858

Purpose of Disbursement
Contribution

Candidate Name
Bart Stupak

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 01

Transaction ID: 47072-5859796404838

Date of Disbursement

07 / 20 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Whole Foods

Mailing Address 1440 P Street, NW

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Catering Services

Candidate Name
Sherrod Brown

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District:

Transaction ID: V11680-2993432879447

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

495.45

In-Kind

SUBTOTAL of Disbursements This Page (optional)

495.45

TOTAL This Period (last page this line number only)

11089.66